

Diabetes in Indiana



More than half a million adults in Indiana have diabetes!

- ✓ An estimated 358,000 adults (7.8%) have been diagnosed with diabetes in Indiana. (2003)
- ✓ An estimated 193,000 adults in Indiana have diabetes, but haven't been diagnosed. (2003)
- ✓ The average yearly health care cost for a person with diabetes in the US was \$13,243 in 2002, compared with \$2,560 for a person *without* diabetes.
- ✓ Diabetes mellitus is a group of diseases characterized by high levels of blood glucose resulting from defects in insulin production, insulin action, or both. There are several types of diabetes.
- ✓ Type 1 most often appears during childhood or adolescence and accounts for 5%-10% of all diagnosed cases of diabetes. In Type 1 diabetes, the body's immune system destroys the cells that produce insulin, the substance necessary to regulate blood glucose. The risk factors for Type 1 diabetes may include autoimmune, genetic and environmental risk factors. At present, there is no known way to prevent Type 1 diabetes.
- ✓ Gestational diabetes is a form of glucose intolerance diagnosed in some women during pregnancy. In Indiana, 1.4% of adult women have been diagnosed with gestational diabetes. (2003)
- ✓ Women with preexisting diabetes as well as women with gestational diabetes are at higher risk of complications during pregnancy. Poorly controlled diabetes before conception and during the first trimester of pregnancy can cause major birth defects in 5% to 10% of pregnancies and spontaneous abortions in 15% to 20% of pregnancies. These risks can be reduced with screenings and diabetes care before, during, and after pregnancy.
- ✓ Type 2 diabetes usually begins as insulin resistance, a disorder in which the cells do not use insulin properly. As the need for insulin rises, the pancreas gradually loses its ability to produce insulin. Type 2 accounts for 90%-95% of diagnosed diabetes cases and is linked to obesity and physical inactivity. Other risk factors include race/ethnicity and family history of diabetes. Type 2 diabetes most often appears in people older than 40, but is increasingly being diagnosed in children and teens and is no longer considered an adults-only disease.
- ✓ Prediabetes is a term used to distinguish people who are at increased risk of developing Type 2 diabetes. People with prediabetes have higher blood sugar than normal, though not high enough to be diagnosed with diabetes. An estimated 40% of Hoosiers aged 40-74 have prediabetes.
- ✓ Progression to Type 2 diabetes is not inevitable for people with prediabetes or other risk factors. Research studies have found that lifestyle changes can prevent or delay the onset of type 2 diabetes among high-risk adults. Lifestyle interventions included diet and moderate-intensity physical activity (such as walking for 2 1/2 hours each week). In the Diabetes Prevention Program, a large prevention study of people at high risk for diabetes, the development of diabetes was reduced 58% over 3 years.

- ✓ Diabetes and its complications occur among all ages and racial/ethnic groups, although certain racial/ethnic groups and the elderly are more affected by the disease. The prevalence of diabetes increases with age. In Indiana, while less than 1% of adults aged 18 to 24 had been diagnosed with diabetes, 21.8% of men and 14.5% of women aged 65 and older had been diagnosed with diabetes. (2003)
- ✓ Early diagnosis and proper treatment of diabetes can delay or even prevent serious diabetes-related health problems. A healthy diet and moderate physical activity can help prevent the complications of diabetes.
- ✓ Diabetes is the sixth leading cause of death in Indiana overall. It is the fifth leading cause of death within the black population and the fourth leading cause of death among black women. (2002)
- ✓ Heart disease is the leading cause of diabetes-related deaths. Adults with diabetes have heart disease death rates about 2 to 4 times higher than adults without diabetes.
- ✓ Heart disease and stroke cause about 65% of deaths among people with diabetes. These deaths could be reduced by 30% with improved care to control blood pressure, blood glucose, and blood cholesterol levels.
- ✓ Diabetes is the leading cause of new cases of blindness among adults. Regular eye exams and timely treatment could prevent up to 90% of diabetes-related blindness. Of adults with diabetes in Indiana, 78% reported a dilated eye exam within the previous year. (2003)
- ✓ Diabetes is the leading cause of end-stage renal disease, accounting for 44 percent of new cases. Treatment to better control blood pressure and blood glucose levels could reduce diabetes-related kidney failure by about 50%.
- ✓ About 60% to 70% of people with diabetes have mild to severe forms of nervous system damage. Severe forms of diabetic nerve disease are a major contributing cause of lower-extremity amputations. More than 60% of nontraumatic lower-limb amputations occur among people with diabetes. Foot care programs that include regular examinations and patient education could prevent up to 85% of diabetes-related leg, foot, or toe amputations. Only 70% of adults with diabetes in Indiana reported having their feet checked by a health professional during the previous year. (2003)
- ✓ People with diabetes should get a flu shot every year, and a pneumonia shot once in their lifetime, since people with diabetes are roughly three times more likely to die of complications from the flu or pneumonia than people without diabetes. (Frequently a second pneumonia shot is recommended 5+ years after the first, depending on age at first shot.) Of Hoosier adults with diagnosed diabetes, only 55% reported getting a flu shot during the previous year, and only 48% reported ever getting a pneumonia shot in their lifetime. (2002)
- ✓ Treatment of diabetes is aimed at keeping blood glucose near normal levels at all times. Training in self-management is integral to the treatment of diabetes. Only 54% of Hoosier adults with diabetes reported taking a diabetes self-management course. (2003)
- ✓ While 89% of Hoosiers with diabetes reported having their A1C checked at least once during the previous year, only 58% reported checking their blood sugar at least once a day. (2003)

Sources: U.S. Department Of Health and Human Services, Centers for Disease Control and Prevention:

Diabetes: Disabling, Deadly, and on the Rise 2004; National diabetes fact sheet 2003: general information and national estimates on diabetes in the United States, 2003; CDC BRFSS 2003; Indiana BRFSS 2002

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